EXHIBIT A

SUMMONS (CITACION JUDICIAL)

RECEIVED

NOTICE TO DEFENDANT: (AVISO AL DEMANDADO):

NOV 2 1 2024

STANFORD HEALTH CARE AND DOES 1 - 50, INCLUSIVE

OFFICE OF THE GENERAL COUNSEL

SUM-100 FOR COURT USE ONLY (SOLD PARA USO DE LA CORTE) Clerk of the Gaurt inta Clara

YOU ARE BEING SUED BY PLAINTIFF: (LO ESTÁ DEMANDANDO EL DEMANDANTE):

DOE #1400

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NOTICE! You have been sued. The court may decide against you without your being heard unless you respond within 30 days. Read the information

You have 30 CALENDAR DAYS after this summons and legal papers are served on you to file a written response at this court and have a copy served on the plaintiff. A letter or phone call will not protect you. Your written response must be in proper legal form if you want the court to hear your case. There may be a court form that you can use for your response. You can find these court forms and more information at the California Courts Online Self-Help Center (www.courtinfo.ca.gov/selfhelp), your county law library, or the courthouse nearest you. If you cannot pay the filing fee, ask the court clerk for a fee waiver form. If you do not file your response on time, you may lose the case by default, and your wages, money, and property may be taken without further warning from the court.

There are other legal requirements. You may want to call an attorney right away. If you do not know an attorney, you may want to call an attorney referral service. If you cannot afford an attorney, you may be eligible for free legal services from a nonprofit legal services program. You can locate these nonprofit groups at the California Legal Services Web site (www.lawhelocalifornia.org), the California Courts Online Self-Help Center (www.courtinfo.ca.gov/selfhelp), or by contacting your local court or county bar association. NOTE: The court has a statutory lien for waived fees and costs on any settlement or arbitration award of \$10,000 or more in a civil case. The court's lien must be paid before the court will dismiss the case. ¡AVISOI Lo han demandado. Sí no responde dentro de 30 días, la corte puede decidir en su contra sin escuchar su versión. Lea la información e continuación.

Tiene 30 DÍAS DE CALENDARIO después de que le entreguen esta citación y papeles legales para presentar una respuesta por escrito en esta corte y hacer que se entregue una copia al demandante. Una carta o una flamada telefónica no lo protegen. Su respuesta por escrito tiene que estar en formato legal correcto si desea que procesen su caso en la corte. Es posible que haya un formulario que usted pueda usar para su respuesta. Fuede encontrar estos formularios de la corte y más información en el Centro de Ayuda de las Cortes de California (www.sucorte.ca.gov), en la biblioleca de leyes de su condado o en la corte que le quede más cerca. Si no puede pagar la cuota de presentación, pida al secretario de la corte que le de un formulario de exención de pago de cuotas. Si no presenta su respuesta a tiempo, puede perder el caso por incumplimiento y la corte le podrà quitar su sueldo, dinero y blenes sin más advertencia.

Hay otros requisitos legales. Es recomendable que llame a un abogado inmediatamente. Si no conoce a un abogado, puede llamar a un servicio de remisión a abogados. Si no puede pagar a un abogado, es posible que cumpla con los requisitos para abtener servicios legales gratuitos de un programa de servicios legales sin fines de lucro. Puede encontrar estos grupos sin fines de lucro en el sitio web de California Legal Services, (www.lawheipcelifornia.org), en el Centro de Ayuda de las Cortes de California, (www.sucorte.ca.gov) o poniéndose en contacto con la corte o el colegio de abogados locales. AVISO: Por ley, la corte tiene derecho a reclamar las cuotas y los costos exentos por imponer un gravamen sobre cualquier recuperación de \$10,000 ó más de valor recibida mediante un acuerdo o una concesión de arbitraje en un caso de derecho civil. Tiene que pagar el gravamen de la corte antes de que la corte pueda desechar el caso.

The name and address of the court is:

(El nombre y dirección de la corte es): SUPERIOR COURT OF CALIFORNIA COUNTY OF SANTA CLARA

191 M. FIRST STREET, SAN JOSE, 95113

CASE NUMBER: Número del Caso): 24 CV446393

The name, address, and telephone number of plaintiffs attorney, or plaintiff without an attorney, is: (El nombre, la dirección y el número de teléfono del abogado del demandante, o del demandante que no tiene abogado, es): P.O. BOX 1198, SACRAMENTO, 95812 TELEPHONE 530-539-4423 PROSE DOE#1400 CHURCO PHYLO DATE: Clerk, by Deputy Clerk of the Court (Secretario) CED 0 3 2024 (Fecha) (Adjunto) e of this summons, use Proof of Service of Summons (form POS-010)

	esta citatión use el formulario Proof of Service of Summons, (POS-010)).
[SEAL]	NOTICE TO THE PERSON SERVED: You are served
BEAL OF	1. as an individual defendant.
	2. as the person sued under the fictitious name of (specify):
	2. as the person sued under the fictitious name of (specify):
Variation 18	under: CCP 416.10 (corporation) CCP 416.60 (minor)
	CCP 416,20 (defunct corporation) CCP 416.70 (conservatee)
VIFORHIA!	CCP 416.40 (association or partnership) CCP 416.90 (authorized person)
	other (specify):
ORDERSON STOREGE STOREGE ACTION AND A STANSON OF THE STANSON SAME STANSON AND AND ASSESSMENT OF THE STANSON SAM	4 by personal delivery on (date):

Form Adopted for Mandatory Use Judicial Council of Californ SUM-100 [Rev. July 1, 2009]

SUMMONS

Code of Civil Procedure §§ 412.20, 465 www.courts.ca.gov

Page 1 of 1

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ATTORNEY OR PARTY WITHOUT ATTORNEY OVADIR. STADE BAST. DOE 41406 P. E. BOX 1693 SA	See See See	FOR COURT USE ONLY
	(ENDORSED)	
TELEPHONE NO.: 530-539-4423 EMAIL ADDRESS: Vaphonereno@gmail.com		
ATTORNEY FOR MAMO: PRO SE		
SUPERIOR COURT OF CALIFORNIA, COUNTY O	SFP 0 3 2024	
STREET ADDRESS. 191 N. FIRST STREET		
MAILING AUDHESS: 191 N. FIRST STREET	Clock of the Court	
CITY AND ZIP CODE SAN JOSE, 95113	J. NGUYEN	
OPANIO NAME DOWNTOWN SUPERIOR CO	UKI	And a comment of the
CASE NAME: DOE #1400 v STANFORD HEALTH CARE and DO	DES 7 - 50, INCLUSIVE	
CIVIL CASE COVER SHEET	Complex Case Designation	CASE NUMBER
X Unlimited Limited	Counter Joinder	CASE NUMBER 4 CV446393
(Amount (Amount	Filed with first appearance by defenda	1 Marie Marie Carrier
demanded demanded is	(Cal Rules of Court rule 3 400)	INT LANGE
exceeds \$35,000) \$35,000 or less	i) Now must be completed (see instructions	
Check one box below for the case type th	at best describes this case:	SALDEGE LI.
Auto Tort	Contract	Provisionally Complex Civil Litigation
Auto (22)	Breach of contract/warranty (06)	(Cal. Rules of Court, rules 3.400-3.403)
Uninsured motorist (46)	Rule 3.740 collections (09)	Antitrust/Trade regulation (03)
Other PI/PD/WD (Personal Injury/Property	Other collections (09)	Construction defect (10)
Damage/Wrongful Death) Tort	Insurance coverage (18)	Mass tort (40)
Asbestos (04)	Other contract (37)	Securities litigation (28)
Francial naming (24)	Real Property	Environmental/Toxic tort (30)
Medical malpractice (45)	Eminent domain/inverse	Insurance coverage claims arising from the
Other PI/PD/WD (23)	condemnation (14)	above listed provisionally complex case types (41)
Non-PI/PDAVD (Other) Tort	Wrongful eviction (33)	Enforcement of Judgment
Business tort/unfair business practice (07) Other real property (26) Unlawful Detainer	Enforcement of judgment (20)
X Civil rights (08)	Commercial (31)	Miscellaneous Civil Complaint
Defamation (13)	Residential (32)	RICO (27)
Fraud (16)	Drugs (38)	Other complaint (not specified above) (42)
Intellectual property (19) Professional negligence (25)	Judicial Review	Miscellaneous Civil Petition
Other non-PI/PD/MO toxt (35)	Asset forfeiture (95)	Partnership and corporate governance (21)
Employment	Petition re_arbitration award (11)	Other petition (not specified above) (43)
Wrongful termination (36)	Writ of mandate (02)	Similared to the contract of t
Other employment (15)	Other judicial review (39)	
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factors requiring exceptional judicial mana		area or conit it the case is withliest flight the
a Large number of separately repre	The state of the s	er of witnesses
b. Extensive motion practice raising	difficult or novel e. Coordination	with related actions pending in one or more
issues that will be time-consuming	to resolve courts in oth	er counties, states, or countries, or in a federal
c. Substantial amount of documenta	ry evidence f. Substantial c	postjudgment judicial supervision
Remedies sought (check all that apply); a:		declaratory or injunctive relief c. 🛣 punitive
Number of causes of action (specify): 42 L	J.S.G. \$ 2000d et sen CA CIVIL CODE S	SEC. 51 AND 54 through 55.2; 29 U.S.C. § 794
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If there are any known related cases, file a	The state of the s	nay use form CM-015.)
ate: 8/30/2024 W V/V		
e rom conservamente se a se a la conservamente de la Conservamente de la Conservamente de la Conservamente de c	ing garage contract of the con	
(TYPE OR PRINT NAME)	NOTICE	HGRATURE OF PARTY OR AFTORNEY FOR PARTY)
Plaintiff must file this cover sheet with the first pa	sper filed in the action or proceeding (except s	mail claims cases or cases filed
under the Probate Code, Family Code, or Welfar	e and Institutions Code). (Cal. Rules of Court,	rule 3.220.) Failure to file may result in sanctions.
 File this cover sheet in addition to any cover shee If this case is complex under rule 3.400 et seq; of 		a poor of this pour chast and alkar nade
the action or proceeding.		
Unless this is a collections case under rule 3.740	or a complex case, this cover sheet will be us	ed for statistical purposes only.

INSTRUCTIONS ON HOW TO COMPLETE THE COVER SHEET

To Plaintiffs and Others Filing First Papers. If you are filing a first paper (for example, a complaint) in a civil case, you must complete and file, along with your first paper, the Civil Case Cover Sheet contained on page 1. This information will be used to compile statistics about the types and numbers of cases filed. You must complete items 1 through 6 on the sheet. In item 1, you must check one box for the case type that best describes the case. If the case fits both a general and a more specific type of case listed in item 1, check the more specific one. If the case has multiple causes of action, check the box that best indicates the primary cause of action. To assist you in completing the sheet, examples of the cases that belong under each case type in item 1 are provided below. A cover sheet must be filed only with your initial paper. Failure to file a cover sheet with the first paper filed in a civil case may subject a party, its counsel, or both to sanctions under rules 2.30 and 3.220 of the California Rules of Court.

To Parties in Rule 3.740 Collections Cases. A "collections case" under rule 3.740 is defined as an action for recovery of money owed in a sum stated to be certain that is not more than \$25,000, exclusive of interest and attorney's fees, arising from a transaction in which property, services, or money was acquired on credit. A collections case does not include an action seeking the following: (1) tort damages, (2) punitive damages, (3) recovery of real property, (4) recovery of personal property, or (5) a prejudgment writ of attachment. The identification of a case as a rule 3.740 collections case on this form means that it will be exempt from the general time-for-service requirements and case management rules, unless a defendant files a responsive pleading. A rule 3.740 collections case will be subject to the requirements for service and obtaining a judgment in rule 3.740.

To Parties in Complex Cases. In complex cases only, parties must also use the Civil Case Cover Sheet to designate whether the case is complex. If a plaintiff believes the case is complex under rule 3.400 of the California Rules of Court, this must be indicated by completing the appropriate boxes in items 1 and 2. If a plaintiff designates a case as complex, the cover sheet must be served with the complaint on all parties to the action. A defendant may file and serve no later than the time of its first appearance a joinder in the plaintiff's designation, a counter-designation that the case is not complex, or, if the plaintiff has made no designation, a designation that the case is complex.

Auto Tort

Auto (22)-Personal Injury/Property Damage/Wrongful Death Uninsured Motorist (46) (if the case involves an uninsured motorist claim subject to arbitration, check this item instead of Auto)

Other PI/PD/WD (Personal Injury/ Property Damage/Wrongful Death) Tort

Asbestos (04) Asbestos Property Damage Asbestos Personal Injury/ Wrongful Death Product Liability (not asbestos or toxic/environmental) (24)

Medical Malpractice (45) Medical Malpractice-Physicians & Surgeons

Other Professional Health Care Malpractice

Other PI/PD/WD (23) Premises Liability (e.g., slip

and fall)

Intentional Bodily Injury/PD/WD (e.g., assault, vandalism) Intentional Infliction of

Emotional Distress Negligent Infliction of

Emotional Distress Other PI/PD/WD

Non-PI/PD/WD (Other) Tort

Business Tort/Unfair Business Practice (07)

Civil Rights (e.g., discrimination, false arrest) (not civil harassment) (08)

Defamation (e.g., slander, libel) (13)

Fraud (16)

Intellectual Property (19) Professional Negligence (25)

Legal Malpractice Other Professional Malpractice

(not medical or legal) Other Non-PI/PD/WD Tort (35)

Employment

Wrongful Termination (36) Other Employment (15)

CASE TYPES AND EXAMPLES Contract

Breach of Contract/Warranty (06) Breach of Rental/Lease Contract (not unlawful detainer or wrongful eviction) Contract/Warranty Breach-Seller

Plaintiff (not fraud or negligence) Negligent Breach of Contract/ Warranty

Other Breach of Contract/Warranty Collections (e.g., money owed, open

book accounts) (09) Collection Case-Seller Plaintiff

Other Promissory Note/Collections Case

Insurance Coverage (not provisionally complex) (18)

Auto Subrogation Other Coverage

Other Contract (37) Contractual Fraud

Other Contract Dispute

Real Property

Eminent Domain/Inverse Condemnation (14) Wrongful Eviction (33)

Other Real Property (e.g., quiet title) (26)

Writ of Possession of Real Property Mortgage Foreclosure

Quiet Title

Other Real Property (not eminent domain, landlord/tenant, or

foreclosure)

Unlawful Detainer

Commercial (31) Residential (32)

Drugs (38) (if the case involves illegal drugs, check this item; otherwise.

report as Commercial or Residential)

Judicial Review

Asset Forfeiture (05)

Petition Re. Arbitration Award (11)

Writ of Mandate (02)

Writ-Administrative Mandamus Writ-Mandamus on Limited Court

Case Matter Writ-Other Limited Court Case Review

Other Judicial Review (39) Review of Health Officer Order

Notice of Appeal-Labor Commissioner Appeals.

Provisionally Complex Civil Litigation (Cal. Rules of Court Rules 3.400-3.403)

CM-010

Antitrust/Trade Regulation (03) Construction Defect (10) Claims Involving Mass Tort (40) Securities Litigation (28) Environmental/Toxic Tort (30) Insurance Coverage Claims

(arising from provisionally complex case type listed above) (41)

Enforcement of Judgment

Enforcement of Judgment (20) Abstract of Judgment (Out of County)

Confession of Judgment (non-domestic relations)

Sister State Judgment Administrative Agency Award

(not unpaid taxes) Petition/Certification of Entry of

Judgment on Unpaid Taxes

Other Enforcement of Judgment Case

Miscellaneous Civil Complaint

RICO (27)

Other Complaint (not specified above) (42)

Declaratory Relief Only Injunctive Relief Only (non-

harassment) Mechanics Lien

Other Commercial Complaint

Case (non-tort/non-complex) Other Civil Complaint

(non-tort/non-complex)

Miscellaneous Civil Petition

Partnership and Corporate Governance (21)

Other Petition (not specified above) (43)

Civil Harassment Workplace Violence

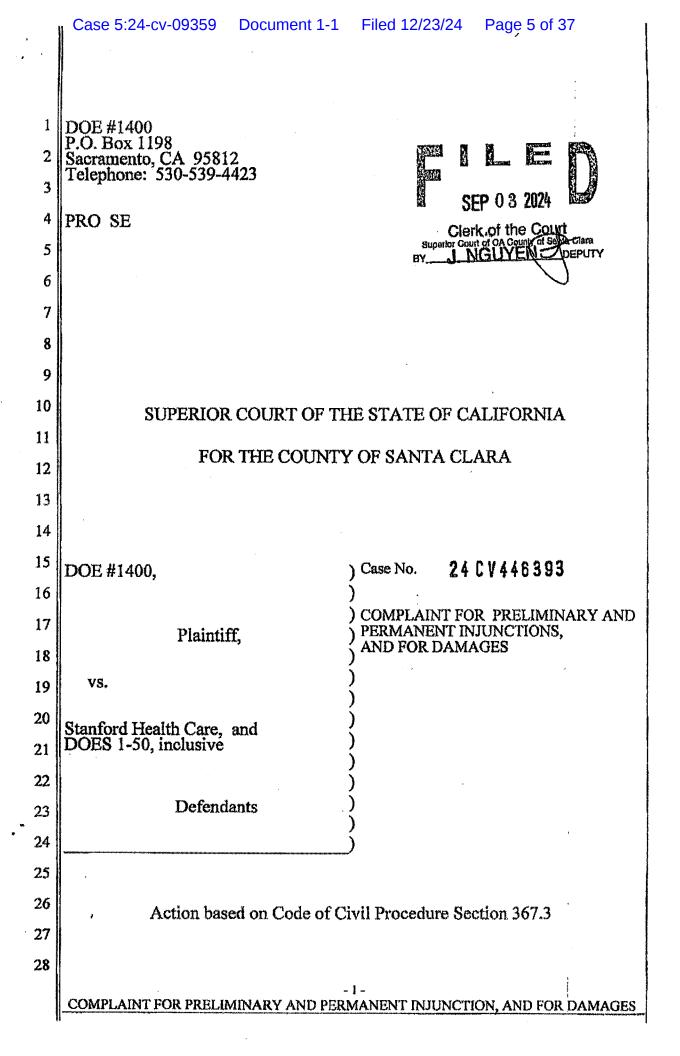
Elder/Dependent Adult Abuse

Election Contest

Petition for Name Change

Petition for Relief From Late Claim

Other Civil Petition



Plaintiff alleges:

- 1. Plaintiff, DOE #1400 (a.k.a. "#1400") is, and at all times mentioned in this complaint was, a natural person residing in Santa Clara County, in the State of California.
- 2. At all times alleged herein, Plaintiff has a personal right to request and be granted Reasonable Accommodations and/or Modifications by medical providers due to multiple disabilities, especially cognitive or aural difficulty that prevent Plaintiff from participating in their health care without reasonable accommodations for effective communication. When SHC refuses to supply the auxiliary equipment and refuses to print any document in a timely manner, Plaintiff suffers. Plaintiff needs paper format *timely*, in the same amount of time as the information would appear in a pocket phone. Equal access.
- 3. Plaintiff has repeated to SHC (via an Advocacy Attorney firm, who does not represent Plaintiffs in cases such as these) ad nauseam that anyone who wants to talk to them about important things (like medical information) the provider needs to PRINT anything they want to "say" in black and white, on paper. No other health provider has refused to push the green button that says "print" except Stanford Health Care ("SHC").
- 4. Stanford Health Care has failed consistently in their obligation to offer alternative means of communication, without stating any reason at all. Instead of having a 1557 Coordinator on board, they pay an outside firm to implement what is supposed to be "timely" and "interactive". The outside counsel hired by SHC, according to his online presence and profile, appears to specialize in quashing cases similar to the Plaintiff's case. The outside attorney has now consumed 2 years of the Plaintiff's life doing nothing they would consider an "interactive process". The outside counsel has wasted over 1 year of this time engaging the Plaintiff's Attorney's firm researching far-fetched and non-existent statutes that would bar the Plaintiff in having a reasonable

accommodation. Also, SHC outside counsel has remained long periods of weeks and months, utterly silent for long periods of time for no logical reason. This unnecessary delay is another egregious discriminatory act under The Americans With Disabilities Act; The Unruh Civil Rights Act, Cal. Civ. Code § 51 and Cal. Civ. Code § 52; Title III of ADA; Section 504 of The 1973 Rehabilitation Act; Section 1557 of The Patient Protection and Affordable Care Act ("ACA"), and HIPAA. An interactive process should be "timely".

- 5. SHC's denials which have been ongoing every single day since October 20, 2021 have occurred at every single SHC facility since that day, and by everyone (known, and unknown named "Does"), Plaintiff sought their assistance to help make their disability needs known in the context within those facilities to achieve equal treatment that non-disabled people are afforded. Meanwhile, it is apparent that Stanford's outside counsel has no intention of granting anything. They just want the case to go away the easiest way is just to drag it out until the Plaintiff dies, which will happen sooner rather than later.
- 6. Stanford Health Care has perpetrated multiple violations against the Plaintiff in the above-named Statutes that protect people with disabilities, Federally and by State. In California, The Unruh Civil Rights Act, Cal. Civ. Code § 51 (f) states: "A violation of the right of any individual under the federal Americans with Disabilities Act of 1990 (Public Law 101-336) shall also constitute a violation of this section." SHC violates this law with impunity and without any explanation as to their reasons for denying full use with effective communication at Stanford Health Care facilities. Plaintiff suspects this is due to a four-page letter hand-delivered in December 2021, because SHC refuses to acknowledge the content of that letter nor have they sought a way to resolve it. It reflects on the issue where Plaintiff was being pushed out the door, and the more SHC pushed them out, the harder the Plaintiff fought to remain a patient at their preferred clinic at Stanford's "award winning" LGBTQ+ clinic.

- 7. Defendant Stanford Health Care and Does 1-50, and at all times mentioned in this complaint was, a Nonprofit Corporation providing an "umbrella" that covers all of their entities. They solicit funds from Medicare and Medicaid and as such, are beholden to the "Assurance Of Compliance", the Federal guarantee called "HHS-690" form, where the named person is identified as only "Stanford Health Care" on 7/6/2021. Even Stanford Health Care itself does not differentiate between or draw a distinction from a "partner", a "collaboration", an "affiliate" etc. There is only ONE Stanford Heath Care that seeks Federal and State assistance. All are one. As such, they have an even greater obligation to the taxpayers who subsidize their growth.
- 8. Defendants Doe 1 through Doe 50, inclusive, are sued in this complaint under fictitious names. Their true names and capacities are unknown to Plaintiff. When their true names and capacities are ascertained, Plaintiff will amend this complaint by inserting their true names and capacities herein. (Plaintiff is informed and believes and thereon alleges, that each of the fictitiously named defendants is responsible in some manner for the occurrences alleged in this complaint, and that Plaintiff's damages as alleged in this complaint were proximately caused by those defendants.)

FIRST CAUSE OF ACTION

For preliminary and Permanent Injunction against Stanford Health Care and Defendants Does 1-50, as well as any partners, affiliates, or collaborators, etc:

- 9. Beginning on or about October 20, 2021, SHC wrongfully and unlawfully discriminated against the Plaintiff, in attempting to make the first visit at the LGBTQ+ Clinic their last, and erase the one that just occurred, by leading the Plaintiff to the garage exit without any paperwork in hand but mostly, without a future appointment though promised one.
- 10. A week later, on October 27, 2021, the Primary provider at the clinic, Anthony Pho, made arrangements for an unsolicited phone call to the

Plaintiff, which was a surprise to the Plaintiff because they thought the NP might be calling to set up the follow-up visit as promised at the in-person visit a week earlier. The plaintiff accepted the call, glad to be firmly planted in the clinic of their choice. The NP merely rehashed most of what had been discussed at the in-person visit the week before and said that he was not going to have any available time until the next year due to family obligations to see me as a patient. He said he would set up a referral to the social worker, to establish needed accommodations. He did not transfer the Plaintiff's care to anyone else at the LGBTQ+ Clinic (or any other clinic). When the call was over, the Plaintiff could not help but feel they were just dumped.

- 11. Plaintiff believes SHC was attempting to get rid of a "high maintenance" patient who required many health needs and accommodations in order to participate in their health care. In December 2021, the Plaintiff wrote a letter of complaint to reiterate the asked-for accommodations, as mid-December is when the Plaintiff was aware about the inconsistencies written in the medical record. That's how long it took to get a visit summary for the first visit two months.
- 12. The conflict is ongoing, and still at a stalemate, and Plaintiff made a new discovery on May 9, 2024 that showed the missing link they have been looking for since August 2022. Despite having asked for and received multiple "any and all" medical records requests in 2022, Plaintiff noticed gaps in all 3 sets that were received between December 2022 and January 2023. The one that stuck out most was carried out by the following people in the May record that didn't exist in any of the other 3 sets of records: Director of Operations (name unknown); Stanford General Counsel (name unknown); Stanford Health Care Risk Management (name unknown); Julie Varvel (LGBTQ+ Clinic) and Nadine Massey (LGBTQ+ Clinic assistant manager). All participated to shred Plaintiff's reasonable accommodation list of needs, recorded in the "telephone -5-COMPLAINT FOR PRELIMINARY AND PERMANENT INJUNCTION, AND FOR DAMAGES

encounter" which was entered into Plaintiff's medical record on August 3, 2022. The prior records the Plaintiff received in January 2023 only showed an "encounter" on that date, recorded by Julie Varvel, "RN". It stated: "letter needed". She is not a nurse. The set of records requested in May 2024 showed that the entry of Julie Varvel's on 8/3/2022 had been overwritten by Nadine Massey, without authority. Just "—" in the space where a person with Authority is supposed to indicate in that space exactly what kind of Authority if they have one. That "telephone encounter" (unknown who she called about this - she certainly did not call the Plaintiff) read: "On 8/2/2022, clinic manager, JV, received approval from Risk, SHC Legal, and Director of Operations to send the letter in response to patient's request for Reasonable Accommodations regarding her disabilities. The letter sent via certified mail, and will be presented to the patient during a scheduled appointment with Dr. Tabaka on 8/4/2022. The Los Alto clinic will commit to the accommodations outline in a letter." Plaintiff believes this is retaliation for having made a complaint in December 2021. The "accommodations outlined in the letter" was an outright refusal of accommodations, without Statutory support.

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13. In fact, the letter shredded the Plaintiff's list of needs and was replaced with the words, "It was lovely to see you today!" on the Dr's visit summary. As for the doctor's other written inconsistencies and outright falsehoods, the Plaintiff has not been able to attend a visit at the LGBTQ+ Clinic without having established reasonable accommodations that amount to more than a greeting on a visit summary. SHC's already bad ineffective communication got worse in that moment, and Plaintiff had deep fears that this would make its way to the SHC Liver clinic, where life and death decisions are made about the Plaintiff without providing effective communication. This was especially dangerous to the Plaintiff, in recalling the warning messages that were received in December 2021, which were subtle threats that if the Plaintiff

did not kowtow to the Hepatology provider's demands, the Plaintiff would be dropped as a Stanford patient.

- 14. After several emails requesting information about the letter that Julie Varvel wrote, Julie Varvel put an immediate halt on communications with the Plaintiff, and had Nadine Massey erase her other "RN" entry that she made on August 9, 2021, effectively putting a complete halt to the "interactive process" that actually did not provide any interaction by the Plaintiff.
- 15. This remains an ongoing staredown where Stanford implies that they made a proposal in December 2023 that I (via my Attorneys) have refused. This excruciatingly slow process has achieved the desired result for SHC: The Plaintiff is past the point of no return in terms of health. It is a fact that the Plaintiff's Attorneys communicated a rebuttal to the proposal to try to stave off the fact that the situation was back to square one: A "lovely to see you" visit summary that the SHC outside attorney has upheld as the Gold Standard.
- ending saga for good. Not only does the outcome of this injunction affect the Plaintiff, but Stanford Health Care's systemic disease of stamping out disabled patients needs to get the proper notice from the State, and Federal enforcement agencies. OCR has been investigating this since 2022. California Civil Rights Department has been investigating it since 2023 and the case is now in the appeals department. DHCS is waiting to see which way the wind blows before making a decision. The California Medical Board and the Nursing Board are investigating the events they oversee. Other agencies the Plaintiff have tried to get assistance with are not willing to file anything against Stanford Health Care.
- 17. The Defendants' wrongful conduct, unless and until enjoined and restrained by order of this Court, will cause great and irreparable injury to the Plaintiff as well as the general public especially disabled people who are just as deserving of "award winning care" as anyone who is not disabled. Disability

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rights have no meaning if an entity such as Stanford Health Care can discriminate freely and run rampant all over the Assurance of Compliance form they signed, to receive billions of dollars in the promise of upholding all of the Civil Rights that the HHS-690 requires.

18. Plaintiff has no adequate remedy at law for the injuries currently suffered, which is over two years of the Plaintiff's life wasted pursuing every option to reverse this horrible outcome where Stanford Health Care is getting paid while refusing to communicate effectively with the Plaintiff, which has caused the Plaintiff to believe the results are merely data mining experiences. 10 | For every drop of blood or imaging that the Plaintiff gives with getting nothing in return, except "It was lovely to see you today" -- there is no award of monetary damages that would provide an adequate remedy. An injunction, by a California Superior Court Judge, is the only remedy available to the Plaintiff. The Plaintiff wishes to conclude this matter while still alive to enjoy the benefits of receiving award-winning health care. Money can't fix this. A court order can fix it.

WHEREFORE, Plaintiff prays judgment against defendant(s) as follows:

- 1. For an order requiring defendant(s) to show cause, if any they have, why they should not be enjoined as set forth in this complaint, during the pendency of this action;
- 2. For a preliminary injunction, and a permanent injunction, all enjoining defendants, and each of them, and their agents, servants, and employees, and all persons acting under, in concert with, or for them:
- a. The Defendant(s) should not: avoid, circumvent or otherwise erect more barriers to Civil Rights listed throughout this document; refuse to communicate with the Plaintiff's Attorneys and other advocates (specifically, Livanta, which is Medicare's go-to process when beneficiaries receive sub-par COMPLAINT FOR PRELIMINARY AND PERMANENT INJUNCTION, AND FOR DAMAGES

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care) and allow them to make requests on Plaintiff's behalf; threaten the Plaintiff whether subtly or outright as to continued healthcare provisions—i.e. stop punishing the Plaintiff for having disabilities; stalling or otherwise impede the Plaintiff's list of communication needs as it may change from time to time and each change should not require 2 years of legal negotiations; force the patient to sign consent forms without being allowed to read them in order to maintain their footing as a patient at SHC; use the consent forms as a way to threaten to sever contact with a patient when the patient has questions about what they are signing sight-unseen; making the Medical Records office inaccessible "due to covid" because it prevents people like the Plaintiff who don't have the equipment or the know-how to make a request without personally going into the Records office; allowing the process of requesting records more onerous and time consuming as well as making delivery outside of the defined time allotted under HIPAA; defame the Plaintiff in an indelible Medical Record; upload media that supports your view while you refuse to allow the Patient the same courtesy; refuse the Plaintiff the option of adding a rebuttal to a perceived incorrect comment in the medical record; force Plaintiff and similar others to communicate only through a portal that the Plaintiff cannot navigate, to satisfy your needs to simplify your process that ends up putting massive burdens on the Plaintiff.

b. The Defendants should be ordered to grant the reasonable accommodations that were submitted by the Plaintiff to SHC in June 2022; abide by Section 1557 of the Affordable Care Act that demands SHC to place a factual nondiscrimination statement that identifies a 1557 Coordinator that is NOT an outside attorney but a person who is a trained 1557/504/ADA coordinator and functions solely in that capacity for SHC; train all SHC employees about how to recognize when a patient needs a reasonable accommodation and assist them in finding the Coordinator and making sure the

patient has made contact before disappearing; train all personnel about what auxiliary aids are and how to provide them; answer a phone or email request for a reasonable accommodation with an affirmative and timely response; train all employees about HIPAA and teach them to understand it exists to help patients maintain their PHI and it is not intended to be used as a barrier to preventing giving information to a patient when they request it; develop and implement a grievance procedure that is aligned with Section 504 of the Rehabilitation Act of 1973; change EVERY sign at every SHC or affiliate's signs to show the name, address, and phone number and define the type of Coordinator they are so patients can find them in a timely manner; have the Coordinator be responsive and understand that every request for accommodations is an urgent request.

- 3. Plaintiff asks for costs of suit incurred in this action, and
- 4. for such other and further relief as the court deems proper.
- 5. If Stanford Health Care is found in violation of the signed Assurance of Compliance they signed on 7/6/2021, they should stop receiving Government funding immediately.

Dated: August 30, 2024

Signature, Pro Se

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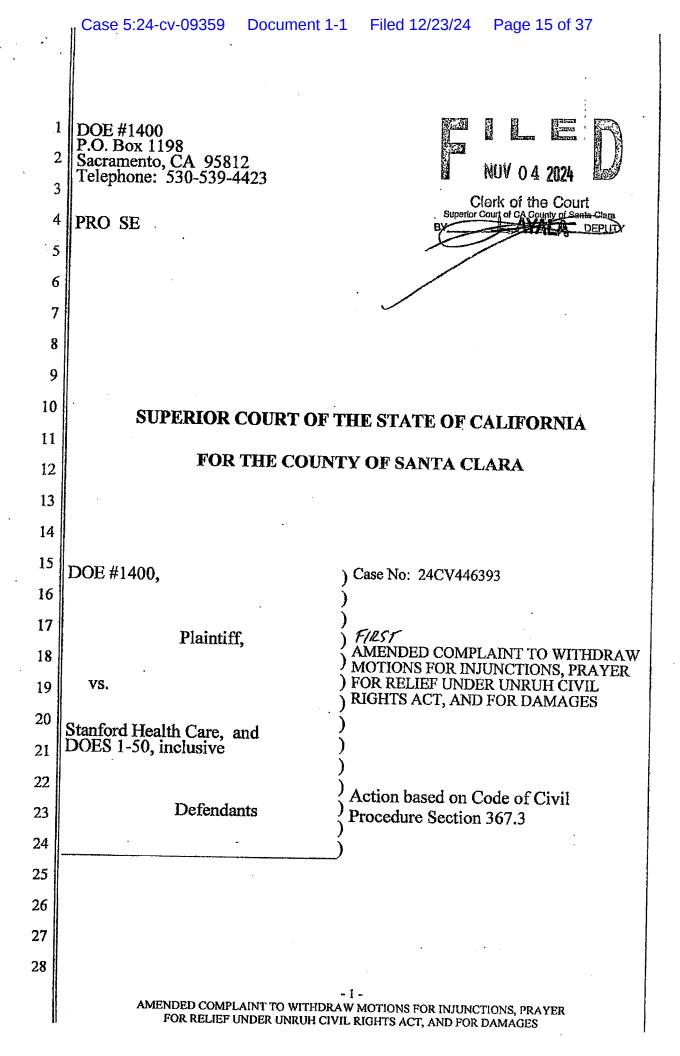
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STATEMENT OF FACTS

Plaintiff alleges:

- 1. Plaintiff, DOE #1400 (a.k.a. "#1400") is, and at all times mentioned in this complaint was, a natural person residing in Santa Clara County, in the State of California.
- 2. Defendants at all times mentioned in this complaint have the singular name, Stanford Health Care ("SHC"), and Stanford Health Care Tri-Valley. All Stanford Health Care facilities are classified in the Secretary of State's corporate listings as having the same Agent for Service of Process.
- 3. At all times alleged herein, Plaintiff has a personal right to request and be granted Reasonable Accommodations and/or Modifications by medical providers due to multiple disabilities which are in the realm of speech, hearing, understanding verbal conversation, writing, remembering, and ambulating.
- 3. According to the HHS rules (guaranteeing they are in compliance with all of the Civil Rights laws associated with the Department of Health and Human Services), Stanford Health Care has several hospitals and clinics that have failed to provide auxiliary aids to the Plaintiff. They are required to abide by the ADA, and Section 504 of the Rehabilitation Act, and Section 1557 of the Affordable Care Act, HIPAA laws, Title III of the ADA, as well as the Unruh Civil Rights Act, and the Disabled Persons Act specifically in the State of California. Of particular note is the Unruh Statute, California Civil Code Section 51(f) which states: "A violation of the right of any individual under the federal Americans with Disabilities Act of 1990 (Public Law 101-336) shall also constitute a violation of this section."
- 4. At all times alleged herein, Plaintiff has a personal right to request and be granted Reasonable Accommodations and/or Modifications by medical providers due to multiple disabilities, among them being cognitive or aural difficulty that prevent Plaintiff from participating in their health care without

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reasonable accommodations for effective communication. When SHC refuses to supply auxiliary equipment and refuses to print any document in a timely manner, Plaintiff suffers. Plaintiff needs paper format *timely*, in the same time frame as the information would appear in a pocket phone. Equal access.

- 5. Plaintiff has repeated to SHC (via an advocacy attorney firm, who does not represent Plaintiffs in cases such as these) ad nauseam that anyone who wants to talk to them about important medical issues, the provider can print it on paper so the Plaintiff can read. No other health provider has refused.
- 6. Stanford Health Care has failed consistently in their obligation to offer alternative means of communication, without stating any reason at all. Instead of having a 1557 Coordinator on board, they pay an outside firm to implement what is supposed to be "timely" and "interactive". The outside counsel hired by SHC, according to his online presence and profile, specializes in quashing reasonable accommodation requests. The outside attorney has now consumed 2 years of the Plaintiff's life doing nothing one would consider an "interactive process". The outside counsel has wasted over 1 year of this time engaging the Plaintiff's Attorney's firm in wild goose chases by referring to non-existent statutes, to which the Plaintiff's Attorney is required to investigate the validity of the supposed statutes, then write memorandums to debunk their allegations and be rewarded for that by SHC outside counsel remaining silent for long periods of time for no logical reason. This unnecessary delay is another discriminatory act under all of the Civil Rights in the HHS-690.
- 7. SHC's denials which have been ongoing every single day since October 20, 2021, and have occurred at every single SHC facility the Plaintiff has visited since that day, and by everyone (known, and unknown named "Does"), Plaintiff sought their assistance to help make their disability needs known in the context within those facilities to achieve equal treatment that non-disabled people are afforded. Meanwhile, it is apparent that Stanford's outside

counsel has no intention of granting anything. They just want the case to go away – the easiest way is just to drag it out until the Plaintiff dies.

- 8. To reiterate and confirm by the experiences of the Plaintiff, Stanford Health Care has perpetrated multiple violations against the Plaintiff in the above-named Statutes that protect people with disabilities. SHC violates laws with impunity and without any explanation as to their reasons for denying full use with effective communication at Stanford Health Care facilities. Years' worth of "negotiating" using lawyers when an "interactive process" is supposed to occur timely and effective, Plaintiff suspects this started due to a four-page letter hand-delivered on December 16, 2021 when Plaintiff realized they had been abandoned, SHC refuses to acknowledge the existence of the letter. It reflects on the issue where Plaintiff was being abandoned, and the more SHC pushed them out, the harder the Plaintiff fought to remain a patient at their preferred clinic at Stanford's "award winning" LGBTQ+ clinic.
- 9. As a further point of fact, SHC's onslaught preceded December 1, 2021. The Plaintiff received multiple messages from multiple SHC facilities, telling the Plaintiff to leave their health network, on December 6, 2021 and December 7, 2021. After the first appointment at the LGBTQ+ Clinic.
- 10. Defendant Stanford Health Care and Does 1-50, and at all times mentioned in this complaint was, a Nonprofit Corporation providing an "umbrella" that covers all of their entities. They solicit funds from Medicare and Medicaid and as such, are beholden to the "Assurance Of Compliance", the Federal guarantee called "HHS-690" form, where the named person is identified as only "Stanford Health Care" on 7/6/2021. Even Stanford Health Care itself does not differentiate between or draw a distinction from a "partner"; a "collaboration"; or an "affiliate" etc. There is only ONE Stanford Heath Care that seeks Federal and State assistance. All are one. As such, they have an even greater obligation to the U.S. taxpayers who subsidize their growth.

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11. Defendants Doe 1 through Doe 50, inclusive, are sued in this complaint under fictitious names. Their true names and capacities are unknown to Plaintiff. When their true names and capacities are ascertained, Plaintiff will amend this complaint by inserting their true names and capacities herein. (Plaintiff is informed and believes and thereon alleges that each of the fictitiously named defendants is responsible in some manner for the occurrences alleged in this complaint, and that Plaintiff's damages as alleged in this complaint were proximately caused by those defendants.)

FIRST CAUSE OF ACTION

Refusal to acknowledge or provide reasonable accommodations

12. Plaintiff discussed reasonable accommodation needs at the first visit with Anthony Pho, an NP who everyone calls "Doctor Anthony". He is not a doctor. He noted many of the needs I presented, and then wrote the exact opposite in the records. His "cure-all" was a spice called Cucurnin. He wrote in the notes that I preferred information by phone, which is completely untrue. He promised to get a referral in the form of a Social Worker to establish my special needs. He seemed to know nothing about reasonable accommodations.

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SECOND CAUSE OF ACTION

Patient Abandonment

13. Beginning on or about October 20, 2021, SHC wrongfully and unlawfully discriminated against the Plaintiff, in attempting to make the first visit at the LGBTQ+ Clinic their last, and erase the one that just occurred, by leading the Plaintiff to the garage exit without any paperwork in hand but mostly, without a future appointment though promised one. A week later, on October 27, 2021, the Primary provider at the clinic, Anthony Pho, made arrangements for an unsolicited phone call to the Plaintiff, which was a surprise to the Plaintiff because they thought the NP might be calling to set up the

follow-up visit as promised at the in-person visit a week earlier. The plaintiff accepted the call, glad to be firmly planted in the clinic of their choice. The NP merely rehashed most of what had been discussed at the in-person visit the week before and said that he was not going to have any available time until the next year due to family obligations to see me as a patient. He said he would set up a referral to the social worker, to establish needed accommodations. He did not transfer the Plaintiff's care to anyone else at the LGBTQ+ Clinic (or any other clinic). When the call was over, the Plaintiff could not help but feel they were just abandoned. He was not calling to help me set up a future appointment; he did not offer to mail a visit summary of any kind. No record of the event; again it was a "goodbye" phone call much the same as the first visit. Plaintiff believes SHC was attempting to get rid of a high maintenance patient with numerous health needs and accommodations in order to participate in their health care. In December 2021, the Plaintiff wrote a letter of complaint to reiterate the asked-for accommodations, as mid-December is when the Plaintiff was aware about the inconsistencies written in the medical record. It took two months to get a "visit summary".

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SECOND CAUSE OF ACTION

Abandonment by Committee, and Entered in the Medical Chart

14. The conflict is ongoing, and still at a stalemate, and Plaintiff made a new discovery on May 9, 2024 that showed the missing link they have been looking for since August 2022. Despite having asked for and received multiple "any and all" medical records requests in 2022, Plaintiff noticed gaps in all 3 sets that were received between December 2022 and January 2023. The one that stuck out most was carried out by the following people in the May record that didn't exist in any of the other 3 sets of records: Director of Operations (name unknown); Stanford General Counsel (name unknown); Stanford Health

Care Risk Management (name unknown); Julie Varvel (LGBTQ+ Clinic
Manager) and Nadine Massey (LGBTQ+ Clinic assistant manager). All
participated to deny Plaintiff's reasonable accommodation list of needs, entered
in the health chart as a "telephone encounter" which was entered into Plaintiff's
medical record on August 3, 2022, which was never provided to the Plaintiff or
their advocacy team. The prior records the Plaintiff received in January 2023
only showed an "encounter" on that date, recorded by Julie Varvel, "RN". It
stated: "letter needed". She is not a nurse. That is a violation of Business and
Professions Code Sections 2795 and 2796, impersonating a nurse is a crime.

The set of records requested in May 2024 showed that the entry of Julie Varvel on 8/3/2022 had been overwritten by Nadine Massey, who has no clinical authority. Just "—" in the space where a person with Authority is supposed to indicate in that space exactly what kind of Authority if they have one. That "telephone encounter" (unknown who she called about this – she certainly did not call the Plaintiff) read: "On 8/2/2022, clinic manager, JV, received approval from Risk, SHC Legal, and Director of Operations to send the letter in response to patient's request for Reasonable Accommodations regarding her disabilities. The letter sent via certified mail, and will be presented to the patient during a scheduled appointment with Dr. Tabaka on 8/4/2022. The Los Alto clinic will commit to the accommodations outlined in a letter." Plaintiff believes this is retaliation for having made a complaint in December 2021. Actually it started before that — when Plaintiff had the first appointment at the LGBTQ+ Clinic.

The "accommodations outlined in a letter" was an outright refusal of accommodations, without Statutory support. In later investigation by California Civil Rights Department ("CRD"), the Plaintiff stated dates that included October 20, 2021 and December 16, 2021, as being the dates that were the catalyst for attempting to oust the Plaintiff as a patient, SHC has never given an

answer to the Plaintiff, or the Plaintiff's attorney, or the Office of Civil Rights, or the CRD about those two dates, as if they did not exist. They did and do exist, yet SHC seems to keep ignoring it hoping it won't get noticed. The 3 Plaintiff notices. But there's something OCR and CRD overlooked. In fact, SHC's hidden chart note referred to a date when the Director of Operations, 5 General Counsel, Risk Management, Clinic Manager, and the Clinic Assistance Manager when they all sat down and decided to deny my accommodations. Penal Code 182 states: a) If two or more persons conspire: (1) To commit any crime; (5) To commit any act injurious to the public health, to public morals, or to pervert or obstruct justice, or the due administration of the laws, then: "When they conspire to commit any other felony, they shall be punishable in the same manner and to the same extent as is provided for the punishment of that felony. If the felony is one for which different punishments are prescribed for different degrees, the jury or court which finds the defendant guilty thereof shall determine the degree of the felony the defendant conspired 15 to commit. If the degree is not so determined, the punishment for conspiracy to commit the felony shall be that prescribed for the lesser degree, except in the 17 18 case of conspiracy to commit murder, in which case the punishment shall be that prescribed for murder in the first degree." As for the doctor's other written 19 20 inconsistencies and outright falsehoods, the Plaintiff has not been able to attend a visit at the LGBTQ+ Clinic without having established reasonable 21 accommodations that amount to more than a greeting on a visit summary. 22 SHC's already bad ineffective communication got worse in that moment, and 23 Plaintiff had deep fears that this would make its way to the SHC Liver clinic, 25 where life and death decisions are made about the Plaintiff without providing effective communication. This was especially dangerous to the Plaintiff, in 26 recalling the warning messages that were received in December 2021, from two 27 separate SHC entities, suggesting I move on and find a new provider. Despite 28

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FOURTH CAUSE OF ACTIONS

the fact that there is only ONE "award winning" liver department in Northern California. After several emails requesting information about the letter that Julie Varvel wrote, Julie Varvel put an immediate halt on communications with the Plaintiff, and had Nadine Massey erase her other "RN" entry that she made on August 9, 2021, effectively putting a complete halt to the "interactive process" that actually did not provide any interaction by the Plaintiff.

THIRD CAUSE OF ACTION

Bad Faith Attempt To Run Out Statutes of Limitations, Enter Mr. Bruno

15. Stanford via outside counsel implies they made a proposal in December 2023 that Plaintiff has refused. This agonizingly slow process has achieved what SHC wants: The Plaintiff is past the point of no return in terms of health. Plaintiff's advocates communicated a rebuttal to the proposal to try to stave off the fact that the situation was back to square one: A "lovely to see you" that added zero value to the Plaintiff, but a fait accompli by SHC.

Stanford Health Care has a systemic disease of stamping out disabled patients' needs regardless of the OCR investigative team, which told SHC to continue the "interactive process" in December 2022. OCR has been investigating this since April 2022. Their last closure letter to the Plaintiff told SHC to continue the "interactive process" (that has actually never begun) until the Plaintiff can benefit from all of SHC's programs. Also, CRD has been investigating since 2023 and the case is now in the appeals department. DHCS is waiting to see which way the wind blows before making a decision. As per SHC's lobby signs, they say contact the department of Public Health (who refused to assist) and the Joint Commission (who also refused to assist) for grievances or denial of accommodation.

Documentation of Allegations

16. Plaintiff has documentation of every allegation described herein, and will be ready to present them to the Court, during Trial. See the "Addendum To Complaint", filed separately.

WHEREFORE, Plaintiff prays judgment against defendant(s) as follows:

- 1. Plaintiff asks for costs of suit incurred in this action, and
- 2. For such other and further relief as the court deems proper;
- 3. Damages to State Treasury, Federal Treasury, or any other benefactor who funds their ever-growing entity;
- 4. Any awards due the Plaintiff resulting from this cause

Plaintiff, DOE #1400, declares under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: November 4, 2024

Pro Se

The motion of Plaintiff, DOE #1400 prays for an order to grant to Plaintiff for an order to substitute first amendment with *corrected* first amendment, and extend date of service of process to 11/25/2014. First hearing, CMC, is 4/15/2024, leaving plenty of time for both Parties to prepare for the hearing with a short delay. Plaintiff did not serve notice to the Defendants, Court clerk suggested without notifying Defendant and filing the application could take more time for a decision without notice.

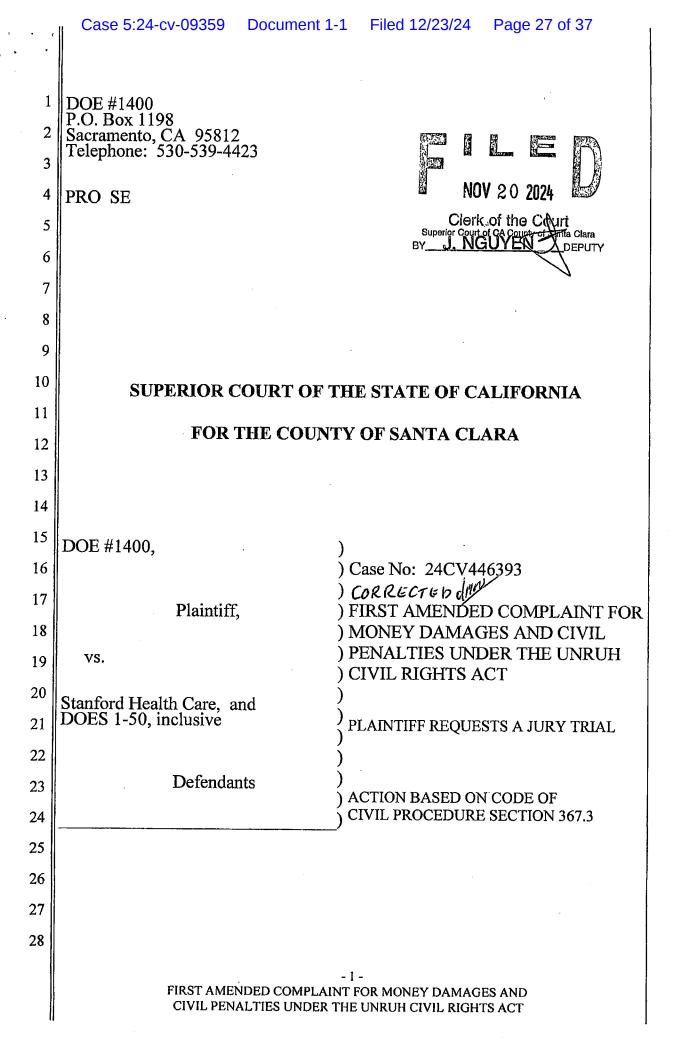
On proof made to the satisfaction of the Court after reading the application herein, that the motion ought to be granted or denied:

IT IS ORDERED that the motion be, and hereby is, GRANTED or BEATED. Plaintiff has 5 days leave to file corrected First Amended Complaint and the date of service of the summons and corrected First Amended Complaint is extended to 11/25/2024.

Dated: November 15, 2024

JUDGE WILLIAM J. MONAHAN

Judge of the Superior Court



STATEMENT OF FACTS

Plaintiff alleges:

- 1. Plaintiff, DOE #1400 (a.k.a. "#1400") is, and at all times mentioned in this complaint was, a natural person residing in Santa Clara County, in the State of California.
- 2. Defendants at all times mentioned in this complaint have the singular name, Stanford Health Care ("SHC"), and Stanford Health Care Tri-Valley. All Stanford Health Care facilities are classified in the Secretary of State's corporate listings as having the same Agent for Service of Process.
- 3. At all times alleged herein, Plaintiff has a personal right to request and be granted Reasonable Accommodations and/or Modifications by medical providers due to multiple disabilities, among them being cognitive or aural difficulty that prevent Plaintiff from participating in their health care without reasonable accommodations for effective communication. When SHC refuses to supply auxiliary equipment and refuses to print any document in a timely manner, Plaintiff suffers. Plaintiff needs paper format *timely*, in the same time frame as the information would appear in a pocket phone. Equal access.
- 4. According to HHS rules (guaranteeing entities are in compliance with all of the Civil Rights laws associated with the Department of Health and Human Services), Stanford Health Care has failed to provide auxiliary aids to the Plaintiff to provide timely paper format at the time of service. While the rest of the world has "gone digital", Plaintiff is unable to participate in health care with a "smartphone". SHC is required to abide by the ADA, and Section 504 of the Rehabilitation Act of 1973, and Section 1557 of the Affordable Care Act, HIPAA laws, Title III of the ADA, as above all else, The Unruh Civil Rights Act, to remove barriers of communication so the Plaintiff can participate in their health care. Removing barriers of communication are inclusive of paving a two-way street, which SHC has steadfastly refused to provide since

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provide since October 20, 2021 up to and including the present day. The Unruh Civil Rights Act, California Civil Code Section 51(f) states: "A violation of the right of any individual under the Federal Americans with Disabilities Act of 1990 (Public Law 101-336) shall also constitute a violation of this section."

- 5. Plaintiff has repeated to SHC (via an advocacy attorney firm, who does not represent Plaintiffs in cases such as these) ad nauseam that anyone who wants to talk to them about important medical issues, the provider needs to print it on paper so the Plaintiff can read. No other health provider has refused. There is no statutory reason for SHC to deny Plaintiff's accommodation needs.
- 6. Stanford Health Care has failed consistently in their obligation to offer alternative means of communication to allow effective communications, without stating any reason at all. This matter is what brought the Plaintiff to this Court, seeking relief. Instead of having a 504 or 1557 Coordinator on board, they pay an outside firm to implement what was supposed to be "timely" and "interactive". Plaintiff believes the outside counsel hired by SHC as a hiree was expressly employed to subvert Plaintiff's attempts to bring a Civil Rights complaint to reverse their systemic disease. According to his online profile it states: "Michael represents universities, in particular their medical and law schools, against claims that the schools have dismissed students, including medical residents, unfairly." His method seems formulaic, after viewing several of his cases in this Court. He has now consumed 2 years of the Plaintiff's life doing nothing one would consider an "interactive process". The outside counsel has wasted over 1 year of this time engaging the Plaintiff's Attorney's firm in wild goose chases by protesting non-existent statutes, to which the Plaintiff's Attorney is required to investigate the validity of the supposed statutes, then write memorandums to debunk their allegations and be rewarded for that by SHC outside counsel remaining silent for long periods of time for no logical reason. This unnecessary delay is another discriminatory act

under the HHS-690.

- 7. SHC's denials which have been ongoing every single day since October 20, 2021, and have occurred at every single SHC facility the Plaintiff has visited since that day, and by everyone (known, and unknown) who was enlisted to defeat the Plaintiff's cause, while Plaintiff sought their assistance to help make their disability needs known in the context within those facilities to achieve equal treatment that non-disabled people are afforded. It is apparent that Stanford's outside counsel has no intention of granting anything.
- 8. Years' worth of "negotiating" using lawyers when an "interactive process" is supposed to occur timely and effectively, Plaintiff suspected at first this stalling effort was pursuant to a four-page letter hand-delivered on December 16, 2021 when Plaintiff realized they had been abandoned. SHC refuses to acknowledge the existence of the letter. The Plaintiff was being abandoned, and the more SHC pushed them out, the harder the Plaintiff fought to remain a patient at their preferred clinic at Stanford's "award winning" LGBTQ+ clinic to benefit from culturally competent primary care.
- 9. As a further point of fact, SHC's onslaught preceded December 16, 2021. The Plaintiff received multiple messages from multiple SHC facilities, telling the Plaintiff to leave their health network, on December 6, 2021 and December 7, 2021. After the first appointment at the LGBTQ+ Clinic. And before the December letter Plaintiff wrote and hand-delivered to NP Pho and his supervisor, Dr. Benji Laniakea who "serves as the chief of the Stanford LGBTQ+ Adult Clinical Program, which offers comprehensive and tailored healthcare for the LGBTQ+ patient population for patients of all ages, sexualities, and gender identities. They also serve as the theme lead for the Sex, Gender, Sexuality, and Sexual Function curriculum at the Stanford School of Medicine for which they received the Arthur L. Bloomfield Award, and have the honor of advising the American Medical Association on LGBTQ+ Health."

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records. When the Practitioner "ghosts" a patient and their supervisor ignores important mail delivered at the front door his bosses door and it is ignored, that is further proof of abandonment. Coupled with the fact there was no other doctor assigned on October 20, 2021 or October 27, 2021, and the Plaintiff never received anything in writing demonstrating they were an established patient at Stanford, which is more proof. 10. Defendant Stanford Health Care and Does 1-50, and at all times mentioned in this complaint was and still is today, a Nonprofit Corporation

He was the Chief in 2021, and he is still the Chief now in 2024. He has not yet

provided a response to the Plaintiff in regards to the four page letter. In fact,

any notice of him appears to have been expunged from Plaintiff's medical

11. Defendants Doe 1 through Doe 50, inclusive, are sued in this complaint under fictitious names. Their true names and capacities are unknown to Plaintiff. When their true names and capacities are ascertained, Plaintiff will amend this complaint by inserting their true names and capacities herein. Plaintiff believes and thereon alleges that each of the fictitiously named defendants is responsible in some manner for the occurrences alleged in this complaint, and that Plaintiff's damages as alleged in this complaint were proximately caused by those defendants.

providing an "umbrella" that covers all of their entities.

FIRST CAUSE OF ACTION

- Refusal to grant reasonable accommodations, which is a violation of all of the aforementioned State and Federal anti-discrimination legislation.
- 12. On October 20, 2021, Stanford Health Care LGBTQ+ Clinical Health Provider Anthony Pho NP provider and at least 2 other staff members (SHC Doe # 2 and #3) refused to fully acknowledge or provide reasonable accommodations to assist Plaintiff's medical needs, which is a violation of ADA, and Section 504 of the Rehabilitation Act, Section 1557 of the

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Affordable Care Act, Title III of the ADA, and California's Unruh Civil Rights Act, and the Disabled Persons Act. On that day, NP Pho wrote a progress note stating Plaintiff wished to enroll with the "LGBTQ program". That was washed away when they kicked me into the gutter where I fell into the drain that washes out to the Bay. He also said "F/U with me in one month given multiple chornic (sic) comorbidites." How was a patient supposed to achieve that, without even receiving a scrap of paper that might say when that appointment be? He acknowledged my multiple chronic co-morbidities, all the time probably aware that the only other substantial healthcare network outside of Stanford was not accepting new Medicare patients. Also, he wrote another note called "Patient Instructions" saying "PLEASE MAKE A FOLLOW-UP APPT FOR ONE MONTH, WILL CALL TO HELP YOU SCHEDULE. NOTE – PT DOES NOT USE MYHEALTH." The Plaintiff is mystified as to how the patient is supposed to receive the instructions from the provider, after the provider has acknowledged the patient is unable to access medical records electronically through a pocket phone (or a laptop, because the Plaintiff's laptop is custom built to meet their accessibility needs).

13. Plaintiff discussed reasonable accommodation needs at that first visit with Anthony Pho, an NP who everyone calls "Doctor Anthony". He is not a doctor. He noted many of the needs Plaintiff presented, and then wrote the exact opposite in the records. He wrote that I preferred information by phone, which is completely wrong. He promised to get a referral in the form of a Social Worker to establish my accommodations. He seemed to know nothing about reasonable accommodation, or who to call when a patient has need for it.

SECOND CAUSE OF ACTION

UNDERLYING SYSTEMIC DISCRIMINATORY PRACTICES.

14. The conflict is ongoing, and still at a stalemate, and Plaintiff made a new discovery on May 9, 2024 that showed the missing link they have been

looking for since August 2022. Despite having asked for and received multiple "any and all" medical records requests in 2022, Plaintiff noticed gaps in all 3 sets that were received between December 2022 and January 2023. The one that stuck out most was carried out by the following people in the May record that didn't exist in any of the other 3 sets of records: Director of Operations (name unknown); Stanford General Counsel (name unknown); Stanford Health Care Risk Management (name unknown); Julie Varvel (LGBTO+ Clinic Manager) and Nadine Massey (LGBTQ+ Clinic assistant manager). All participated to deny Plaintiff's reasonable accommodation list of needs, entered in the health chart as a "telephone encounter" which was entered into Plaintiff's medical record on August 3, 2022, which was never provided to the Plaintiff or their advocacy team. The prior records the Plaintiff received in January 2023 only showed an "encounter" on that date, recorded by Julie Varvel, "RN". It stated: "letter needed". She is not a nurse. That is a violation of Business and Professions Code Sections 2795 and 2796, impersonating a nurse is a crime. The set of records requested in May 2024 showed that the entry of Julie Varvel on 8/3/2022 was overwritten by Nadine Massey, who has no clinical authority. Just "---" in the space where a person with Authority is supposed to indicate in that space exactly what kind of Authority if they have one. That "telephone encounter" (unknown who she called about this - she certainly did not call the Plaintiff) read: "On 8/2/2022, clinic manager, JV, received approval from Risk, SHC Legal, and Director of Operations to send the letter in

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approval from Risk, SHC Legal, and Director of Operations to send the letter in response to patient's request for Reasonable Accommodations regarding her disabilities. The letter sent via certified mail, and will be presented to the patient during a scheduled appointment with Dr. Tabaka on 8/4/2022. The Los Alto clinic will commit to the accommodations outlined in a letter." Plaintiff

believes this is retaliation for having made a written complaint in December

2021. Actually it started before that – when Plaintiff had the first appointment

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15. The "accommodations outlined in a letter" was an outright refusal of accommodations, without Statutory support. In later investigation by California Civil Rights Department ("CRD"), the Plaintiff stated dates that included October 20, 2021 and December 16, 2021, as being the dates that were the catalyst for attempting to oust the Plaintiff as a patient, SHC has never given an answer to the Plaintiff, or the Plaintiff's attorney, or the Office of Civil Rights, or the CRD about those two dates, as if they did not exist. They did and do exist, yet SHC seems to keep ignoring it hoping it won't get noticed. The Plaintiff notices. But there's something OCR and CRD overlooked.

16. They broke the law. The CRD and OCR and OIG and AG should have been part of the investigations. Penal Code 182 states: a) If two or more persons conspire:

"To commit any act injurious to the public health, to public morals, or to pervert or obstruct justice, or the due administration of the laws, then: "When they conspire to commit any other felony, they shall be punishable in the same manner and to the same extent as is provided for the punishment of that felony. If the felony is one for which different punishments are prescribed for different degrees, the jury or court which finds the defendant guilty thereof shall determine the degree of the felony the defendant conspired to commit. If the degree is not so determined, the punishment for conspiracy to commit the felony shall be that prescribed for the lesser degree, except in the case of conspiracy to commit murder, in which case the punishment shall be that prescribed for murder in the first degree."

17. As for the doctor's other written inconsistencies and outright falsehoods, with criminal elements still unresolved, the Plaintiff has not been able to attend a visit at the LGBTQ+ Clinic without having established reasonable accommodations that amount to more than a greeting on a visit

summary. SHC's already bad ineffective communication got worse in the

moment that hidden note was exposed, and Plaintiff had deep fears that this

especially dangerous to the Plaintiff, in recalling the warning messages that

move on and find a new provider. Despite the fact that there is only ONE

would make its way to the SHC Liver clinic, where life and death decisions are

made about the Plaintiff without providing effective communication. This was

were received in December 2021, from two separate SHC entities, suggesting I

"award winning" liver department in Northern California. After several emails

requesting information about the letter that Julie Varvel wrote, Julie Varvel put an immediate halt on communications with the Plaintiff, and had Nadine Massey erase her other "RN" entry that she made on August 9, 2021, effectively putting a complete halt to the "interactive process" that actually did

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THIRD CAUSE OF ACTION

BAD FAITH ATTEMPT TO RUN OUT THE STATUTES OF LIMITATIONS ENTER MR. MICHAEL BRUNO, ATTORNEY REPRESENTING SHC

18. Stanford via outside counsel implies they made a proposal in December 2023 that Plaintiff has refused. This agonizingly slow process has achieved what SHC wants: The Plaintiff is past the point of no return in terms of health. Plaintiff's advocates communicated a rebuttal to the proposal to try to stave off the fact that the situation was back to square one: A "lovely to see you" that added zero value to the Plaintiff, but a fait accompli by SHC.

Stanford Health Care has a systemic disease of stamping out disabled patients' (at least one) needs regardless of the OCR investigative team, which told SHC to continue the "interactive process" in December 2022. OCR has been investigating this since April 2022. Their last closure letter to the Plaintiff told SHC to continue the "interactive process" (that has actually never begun)

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until the Plaintiff can benefit from all of SHC's programs. Also, CRD has been investigating since 2023 and the case is now in the appeals department. DHCS is waiting to see which way the wind blows before making a decision. As per SHC's lobby signs, they say contact the department of Public Health (who refused to assist) and the Joint Commission (who also refused to assist) for grievances or denial of accommodation.

FOURTH CAUSE OF ACTION

DETAILED ALLEGATIONS OF ALL PROOFS READY TO SUBMIT:
IN PARTICULAR, THE NON-AUTHORIZED ENTRIES THAT ARE

DETAILED ALLEGATIONS OF ALL PROOFS READY TO SUBMIT: IN PARTICULAR, THE NON-AUTHORIZED ENTRIES THAT ARE PROOF OF HIPAA VIOLATIONS THAT SHC HAS PERPETRATED

19. Plaintiff has documentation of every allegation described herein, and too many to mention herein, and will be ready to present them to the Court as Exhibits, during Trial. Documents of facts that include missing records that Plaintiff has tried to request but denied without cause; altered records; fabricated records; suppression of records; denial of access to records; dozens of appointments where Plaintiff was denied access to information pertaining to their health care; Information Blocking and criminal activities described herein. It is the Plaintiff's belief that all of these acts were intended to deprive the Plaintiff of any information at all, to dissuade them from joining their LBGTQ+ Clinic where they advertise: "We provide, compassionate, comprehensive, and unparalled LGBTQ+ focused care to adults of the LGBTQ+ community in the San Francisco Bay area and from around the world. Our program offers inperson and video appointments to deliver care in a safe, comfortable, and affirming environment." Their Liver Clinic touts: "Our dedicated teams of physicians are internationally renowned experts in the management of complex GI and liver conditions." An internationally renowned team of experts could and should be up to speed on the ever-changing landscape of Patient's Rights. However, since 2012, their (all SHC's) websites still does not have a proper

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